

## APPLICATION DATA SHEET

### Application Information

**Application Number::** National Stage of PCT/SE02/02385  
**Filing Date::** June 28, 2004  
**Application Type::** Regular  
**Subject Matter::** National Stage Application  
**Suggested Classification::** None  
**Suggested Group Art Unit::** None  
**CD-ROM or CD-R?::** No  
**Number of CD Disks::** 0  
**Number of Copies of CDs::** None  
**Sequence Submission?::** No  
**Computer Readable Form (CFR)?::** No  
**Number of Copies of CFR::** None  
**Title::** DEVICE WHICH CAN BE APPLIED IN BONE AND/OR TISSUE IN THE HUMAN BODY, AND METHOD AND USE OF SAID DEVICE  
**Attorney Docket Number::** 43318-204165  
**Request for Early Publication?::** No  
**Request for Non-Publication?::** No  
**Suggested Drawing Figure::**  
**Total Drawing Sheets::** THREE  
**Small Entity?::** No  
**Latin Name::**  
**Variety Denomination Name::**  
**Petition Included?::** No  
**Petition Type::** None  
**Licensed US Govt. Agency::**  
**Contract or Grant Numbers::** None  
**Secrecy Order in Parent Appl.::**

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Swedish  
**Country::** Sweden  
**Status::** Full Capacity  
**Given Name::** Matts  
**Middle Name::**  
**Family Name::** ANDERSSON  
**Name Suffix::**  
**City of Residence::** LERUM  
**State or Province of Residence::**  
**Country of Residence::** Sweden  
**Street of Mailing Address::** Hammarströmstappa 2  
**City of Mailing Address::** LERUM  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Sweden  
**Postal or Zip Code of Mailing Address::** S-443 39

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Swedish  
**Country::** Sweden  
**Status::** Full Capacity  
**Given Name::** Mikael  
**Middle Name::**  
**Family Name::** ERIKSSON  
**Name Suffix::**  
**City of Residence::** MÖLNDAL  
**State or Province of Residence::**  
**Country of Residence::** Sweden

**Street of Mailing Address::** Gunedefjällsgatan 45  
**City of Mailing Address::** MÖLNDAL  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Sweden  
**Postal or Zip Code of Mailing Address::** S-431 51

### Correspondence Information

**Correspondence Customer Number::** 26694  
**Phone Number::** (202) 344-4000  
**Fax Number::** (202) 344-8300  
**E-Mail Address::** www.venable.com

### Representative Information

**Representative Customer Number::** 26694

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Sweden	0104446-0	December 28, 2001	Yes

**Assignee Information**

**Assignee Name::** NOBEL BIOCARE AB  
**Street of Mailing Address::** Box 5190  
**City of Mailing Address::** Göteborg  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Sweden  
**Postal or Zip Code of Mailing Address::** S-402 26

